

UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON

KERRY D. AUSTIN, on behalf of himself  
and all others similarly situated,

**Plaintiff(s),**

v.

UNION BOND & TRUST CO., et al.

**Defendant(s).**

**Civil Case No.** 3:14-cv-00706-ST

APPLICATION FOR SPECIAL  
ADMISSION – *PRO HAC VICE*

Attorney MICHAEL C. MCKAY requests special admission *pro hac vice* in  
the above-captioned case.

**Certification of Attorney Seeking *Pro Hac Vice* Admission:** I have read and understand the  
requirements of LR 83-3, and certify that the following information is correct:

**(1) PERSONAL DATA:**

Name: MCKAY MICHAEL C.  
(Last Name) (First Name) (MI) (Suffix)

Firm or Business Affiliation: SCHNEIDER WALLACE COTTRELL & KONECKY LLP

Mailing Address: 8501 North Scottsdale Road, Suite 270

City: Scottsdale State: AZ Zip: 85253

Phone Number: (480) 428-0141 Fax Number: (866) 505-8036

Business E-mail Address: mmckay@schneiderwallace.com

**(2) BAR ADMISSIONS INFORMATION:**

**(a)** State bar admission(s), date(s) of admission, and bar ID number(s):

AZ, 10/2004, 023354

**(b)** Other federal court admission(s), date(s) of admission, and bar ID number(s):

**(3) CERTIFICATION OF DISCIPLINARY ACTIONS:**

**(a)** ☒ I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or

**(b)** ☐ I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.)

**(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:**

I have professional liability insurance, or financial responsibility equivalent to liability insurance, that will apply and remain in force for the duration of the case, including any appeal proceedings.

**(5) REPRESENTATION STATEMENT:**

I am representing the following party(s) in this case:

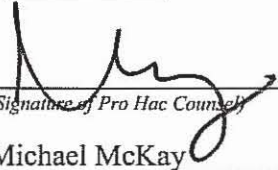
Plaintiff KERRY D. AUSTIN, on behalf of himself

and all others similarly situated

**(6) CM/ECF REGISTRATION:**

Concurrent with approval of this *pro hac vice* application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system. (See the Court's website at [ord.uscourts.gov](http://ord.uscourts.gov)), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon.

DATED this 29th day of April, 2014

  
(Signature of Pro Hac Counsel)

Michael McKay

(Typed Name)

**CERTIFICATION OF ASSOCIATED LOCAL COUNSEL:**

I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in this particular case.

DATED this 29th day of April, 2014

s/Timothy S. DeJong

(Signature of Local Counsel)

Name: DeJong Timothy S.  
(Last Name) (First Name) (MI) (Suffix)

Oregon State Bar Number: 940662

Firm or Business Affiliation: Stoll Stoll Berne Lokting & Shlachter P.C.

Mailing Address: 209 S.W. Oak St., Suite 500

City: Portland State: OR Zip: 97204

Phone Number: (503) 227-1600 Business E-mail Address: (503) 227-6840

**COURT ACTION**

- ☐ Application approved subject to payment of fees.  
☐ Application denied.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Judge